


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90086 041 ***158.75

DOCUMENT # F02000003740 1. Entity Name CAPITOL FIRST CORPORATION					
Principal Place of Business 900 NORTH FEDERAL HIGHWAY, SUITE 410 BOCA RATON, FL 33432			Mailing Address 900 NORTH FEDERAL HIGHWAY, SUITE 410 BOCA RATON, FL 33432		
2. Principal Place of Business 7100 W Camino Real Suite 402			3. Mailing Address 7100 W. Camino Real Suite 402		
City & State Boca Raton, FL			City & State Boca Raton, FL		
Zip 33		Country USA		Zip 33433	
Country USA		4. FEI Number 88-0361144			
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent BRANDON-BROWN, ELIZABETH 900 NORTH FEDERAL HIGHWAY, SUITE 410 BOCA RATON, FL 33432			7. Name and Address of New Registered Agent Brandon Brown, Elizabeth A ESQ 9045 LA FONTANA BLVD. SUITE B-1 BOCA RATON FL 33434		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE: Brandon Brown, Elizabeth A ESQ DATE: 4/21/04 <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD TODD, MICHAEL G <input type="checkbox"/> Delete 25550 HAWTHORNE BLVD., SUITE 207 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition TODD, MICHAEL G 7100 W. Camino Real Suite 402 Boca Raton, FL 33433	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Delete BAPTISTA, RAY 25550 HAWTHORNE BLVD., SUITE 207 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Delete BLAKE, TOM 25550 HAWTHORNE BLVD., SUITE 207 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete BLOOM, ASHLEY 900 N FEDERAL HWY #410 BOCA RATON, FL 33432		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition BLOOM ASHLEY 7100 W. Camino Real Suite 402 Boca Raton, FL 33433	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete LE GAULT, DONALD R 7100 W. Camino Real Suite 402 Boca Raton, FL 33433		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition LE GAULT, DONALD R 7100 W. Camino Real Suite 402 Boca Raton, FL 33433	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Ashley Bloom DATE: 4/21/04 (561) 417-7115 <small>(Signature and typed or printed name of signing officer or director)</small>					